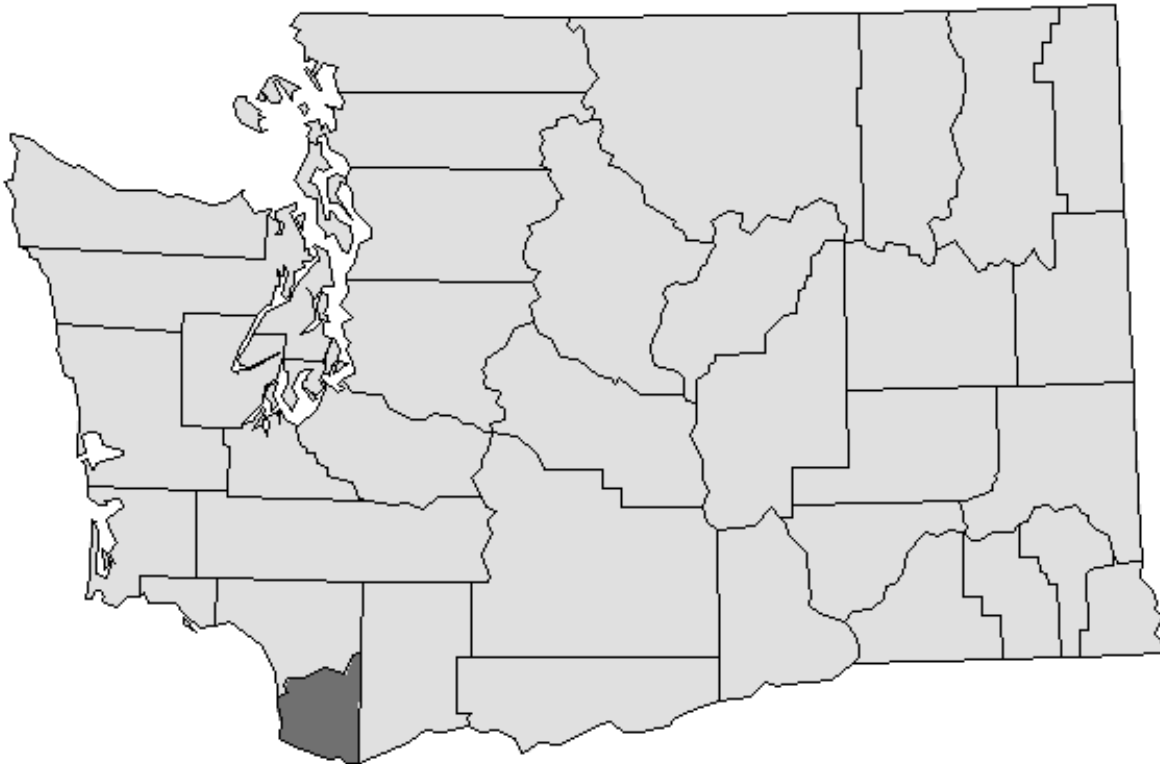


# County Profile of Substance Use and Need for Treatment Services in Clark County



**Washington State Department of  
Social and Health Services**

**Division of Alcohol  
and Substance Abuse**

**Research and Data Analysis**

**December 1999**

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## ***The Purpose of This Report***

The purpose of this report is to provide local planners and evaluators with information that can be used to compare need for and utilization of substance abuse services in counties and demographic subpopulations. The methods used for these county profiles update and improve upon the analyses presented in the first set of county profiles published in 1996. The new county profiles are also complemented by a more comprehensive report located on the DSHS Internet site which includes more detail on methods and additional breakdowns of results. The shorter county profiles are designed to summarize county-specific information and to be printable for distribution as a paper report. Each county profile provides the following:

- estimates of the demographic characteristics of each county population;
- estimates of substance use, substance use disorder, and need for treatment based on the Washington State Needs Assessment Household Survey (WANAHS);
- service utilization data from the Division of Alcohol and Substance Abuse's treatment assessment database (TARGET); and
- comparisons of need for services and use of services both county-wide and by demographic subgroup

## ***The Washington Needs Assessment Household Survey (WANAHS)***

The WANAHS was a statewide survey of over 7,000 adults designed to measure the prevalence of substance use and need for treatment. It was conducted over a 14-month period from September 1993 through October 1994. Funding was provided by a grant from the Federal Center for Substance Abuse Treatment. The Washington State Department of Social and Health Services (DSHS) Research and Data Analysis (RDA) section conducted the project on behalf of the DSHS Division of Alcohol and Substance Abuse. Telephone interviewing was provided by Washington State University's Social and Economic Sciences Center. The WANAHS sample included large numbers of minorities and other special groups in order to facilitate demographic analyses. The WANAHS sample included approximately equal numbers of interviews with African Americans, Asians, Hispanics, American Indians, and non-Hispanic Whites. Additional samples of people living at or below 200% of the Federal Poverty Level (FPL), rural residents, and women were interviewed adding coverage of important, but sometimes overlooked, populations. The survey instrument had questions about current and past use of or dependence on major drugs of abuse. Further details of the interviewing and survey methods are provided in the more detailed on-line report. Upon weighting the WANAHS sample to match the actual population distribution, the survey provides direct statewide estimates of substance use and as well as the need for substance abuse services. A statewide profile is also available as a companion report.

**Methods for Estimating County-level Prevalence Rates.** In order to derive current county level estimates for substance use, abuse and need for treatment from the statewide survey, it was necessary to construct a demographically specified population matrix for each county against which the statewide survey-based rates could be applied. The population matrix contained counts of persons in all groups defined by age, sex, race, marital status, high school graduation, poverty status (at or below 200% of the Federal Poverty Level), and residence type. The population groups were developed from 1990 U. S. decennial census data and updated with current estimates for age, sex, and race from DSHS. All annual estimated and forecasted population figures are adjusted to match official Washington State population figures from the Office of Financial Management.

The substance use variables from the WANAHS were analyzed by the demographic variables listed above. Logistic regression models estimated rates for each cell in the demographic matrix. Differences

between counties in estimated rates of substance abuse result from the demography of the county. For example, counties with higher proportions of young adults will have higher rates of current substance use than counties with lower proportions of young adults, because young adults are more likely to be using substances. Similarly, since married persons are less likely to report substance use, a county with more married people will have a lower estimate of need. Details for this method, often referred to as synthetic estimation, are provided in a more comprehensive on-line report.

### ***Measures of Substance Use, Substance Use Disorder, and Need for Treatment***

The WANAHS obtained measures of use and abuse for many different substances. Those have been presented in previous DASA reports. Some of those measures are also reported here in Tables 2 and 3. Note that tobacco use was not included in the survey. Basic measures of use include having: a) ever used a substance (lifetime use), b) used a substance in the past 12 months (past 18 months for alcohol), and c) used a substance in the past 30 days (current). In addition, the household survey incorporated items and scales from the widely used Diagnostic Interview Schedule (DIS) to assess the substance-related diagnoses of the American Psychiatric Association's Diagnostic and Statistical Manual, Third Edition - Revised (DSM-III-R). Lifetime and past 18 month measures of substance abuse and substance dependence were obtained. Table 1 shows the symptom constructs which are part of the DSM-III-R diagnoses of substance abuse and dependence. Although there have been some changes in the diagnostic criteria with the release of DSM-IV, those are unlikely to greatly affect the present findings.

**Table 1. DSM III-R Symptoms of Substance Dependence**

Three or more of the following:

1. Substance is often taken in larger amounts or over a longer period than the person intended.
2. Persistent desire or one or more unsuccessful attempts to cut down or control substance use.
3. Great deal of time spent in activities necessary to get the substance, taking the substance or recovering from its effects.
4. Frequent intoxication or withdrawal when expected to fulfill major role obligations or when use is physically hazardous.
5. Important social, occupational or recreational activities given up or reduced because of substance use.
6. Continued use despite knowledge of having a persistent or recurrent social, psychological or physical problem.
7. Marked tolerance or markedly diminished effect with continued use of same amount.
8. Characteristic withdrawal symptoms.
9. Substance often taken to relieve or avoid withdrawal symptoms.

Specific assessment criteria for several measures of problem use are presented below:

**DSM-III-R Lifetime Dependence:** A person is diagnosed with lifetime dependence if:

1. they have ever had three or more symptoms of dependence, and
2. at least two of those symptoms lasted a month or more or occurred repeatedly over a longer period of time.

**DSM-III-R Lifetime Abuse:** A person is diagnosed with lifetime abuse if:

1. they do not have a lifetime diagnosis of substance dependence;
2. they have ever continued substance use despite having recurrent social, occupational, psychological or physical problems exacerbated by it OR used repeatedly in situations where use is physically hazardous (determined from a subset of questions used to assess dependence symptoms); and
3. at least one symptom lasted a month or more or occurred repeatedly over a longer period of time.

**Past 18 Month Substance Use Disorder:** A person is diagnosed with a past 18 month substance use disorder if:

1. they have a diagnosis of lifetime dependence or abuse;
2. they have used a substance in the last 18 months, and
3. they have experienced a DSM-III-R abuse or dependence symptom in the last 18 months.

**Past Year Need for Treatment:** A respondent needs treatment during the past year if:

1. they have a past 18 month substance use disorder; OR,
2. they "ever had a problem or felt addicted to alcohol or drugs" AND used alcohol or drugs regularly during the past 18 months (i.e. they drank an average of 3 drinks per drinking day at least once per week OR they used marijuana 50 times or more OR they used any other illicit drug 11 times or more); OR,
3. they have received licensed residential or outpatient treatment services during the past 12 months; OR,
4. they have maintained a very high level of alcohol or drug use during the past 18 months (i.e. they drank an average of 4 drinks per drinking day at least 3 to 4 times per week OR they used any illicit drug 50 times or more).

### ***Population Groups for Analysis***

Overall prevalence estimates for the various measures of substance use, disorder, and need for treatment in Table 2 and the demographically-specific estimates of treatment need in Table 3 are given for three primary populations of interest:

- **entire adult population** (age 18+) including those living in households, institutions (prisons, hospitals, and nursing homes) and group quarters (military barracks, college dorms, shelters). Residential setting is defined according to the U.S. Bureau of the Census definition. The estimates for this population are based on WANAHS survey rates, except that for the institutional population, particularly those in prison, the rates in the WANAHS survey have been inflated beyond the rates for corresponding demographic cell in the household population to compensate for higher rates in these institutional populations.
- **adult population living in households** regardless of poverty status. Estimates for this column come directly from the WANAHS.
- **adult population living in households and living at or below 200% of the Federal Poverty Level (FPL).** Estimates for this population are based on a subset of survey respondents living at or below 200% of the federal poverty guidelines which approximates people potentially eligible for publicly funded treatment services. The proportion of persons in poverty is not updated from the 1990 census data but is adjusted with changes in age, sex, and race.

### ***Estimates of Substance Use, Disorder, and Need for Treatment***

Table 2 presents current, one-year, and lifetime estimates for a variety of alcohol and drug measures. Within each of the columns is a presentation of the estimated number of cases and percent (the rate per 100) of adults estimated to be in need. The population base or denominators for the percentages can be found in the Total row of Table 3.

**Table 2. Estimates of Substance Use, Disorder, and Service Need  
for 1998 for Clark County**

	Entire Adult Population*		Adult Household Residents		Adults at or below 200% of Poverty	
	Cases	Rate	Cases	Rate	Cases	Rate
<b>Need for treatment</b>						
Current Need for Substance Treatment	24,787	10.6	23,990	10.3	5,939	11.2
<b>Alcohol or Drug disorder</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Alcohol or Drug Use Disorder	35,683	15.2	34,829	15.0	8,513	16.1
Past 18-Month Alcohol or Drug Use Disorder	18,026	7.7	17,404	7.5	4,152	7.8
<b>Alcohol disorder</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Alcohol Use Disorder	29,447	12.5	28,708	12.3	6,333	11.9
Past 18-Month Alcohol Use Disorder	16,856	7.2	16,287	7.0	3,526	6.7
<b>Drug disorder</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Drug Use Disorder	12,471	5.3	12,041	5.2	3,957	7.5
Past 18-Month Drug Use Disorder	4,332	1.8	4,126	1.8	1,577	3.0
<b>Alcohol use</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Use of Alcohol	218,835	93.2	216,627	93.2	46,657	88.0
Past 18-Month Use of Alcohol	171,380	73.0	169,522	72.9	31,456	59.3
Past 30-Day Use of Alcohol	133,201	56.7	131,590	56.6	22,973	43.3
<b>Use of any drug</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Use of Any Illicit Drug	98,115	41.8	96,909	41.7	21,232	40.0
Past 12-Month Use of Any Illicit Drug	24,074	10.3	23,321	10.0	6,039	11.4
Past 30-Day Use of Any Illicit Drug	12,225	5.2	11,774	5.1	3,629	6.8
<b>Marijuana use</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Use of Marijuana	94,296	40.2	93,110	40.0	20,159	38.0
Past 12-Month Use of Marijuana	22,274	9.5	21,575	9.3	5,375	10.1
Past 30-Day Use of Marijuana	11,769	5.0	11,346	4.9	3,254	6.1
<b>Stimulant use</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Use of Stimulants	41,313	17.6	40,360	17.4	11,373	21.5
Past 12-Month Use of Stimulants	5,082	2.2	4,789	2.1	1,752	3.3
Past 30-Day Use of Stimulants	2,042	0.9	1,973	0.8	470	0.9
<b>Cocaine use</b>	Cases	Rate	Cases	Rate	Cases	Rate
Lifetime Use of Cocaine	31,735	13.5	30,970	13.3	7,234	13.6
Past 12-Month Use of Cocaine	4,066	1.7	3,828	1.6	1,467	2.8
Past 30-Day Use of Cocaine	1,349	0.6	1,288	0.6	353	0.7

\* Includes institutions and group quarters

### ***Estimates of Current Need for Substance Abuse Services***

Table 3 presents estimates of the prevalence of current need for substance abuse services by demographics. As in the previous table, the columns correspond to the total adult population, the household adult population, and adults in households at or below 200% of the Federal Poverty Level. These have current need estimates of 10.4%, 10.1%, and 11.9%, respectively. As can be seen, there is

substantial demographic variability in the estimated rates with higher estimates of need for: younger persons, men, American Indian or Alaskan Natives and Whites, those never married, high school graduates, and those living at or below 200% of poverty. Estimates are also higher for those in institutions and group quarters.

**Table 3. Estimates of Current Need for Substance Abuse Treatment for Clark County for 1998**

	Entire Adult Population*			Adult Household Residents			Adults at or below 200% Poverty		
Group	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
Total	24,787	234,775	10.6	23,990	232,541	10.3	5,939	53,015	11.2
Age	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
01-17	Not Available			Not Available			Not Available		
18-24	7,560	28,894	26.2	7,340	28,580	25.7	2,204	9,773	22.6
25-44	13,041	101,987	12.8	12,613	101,335	12.4	2,961	22,338	13.3
45-64	3,530	70,946	5.0	3,428	70,700	4.8	619	11,233	5.5
65+	657	32,948	2.0	608	31,926	1.9	155	9,670	1.6
Sex	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
Male	16,482	113,755	14.5	15,748	112,479	14.0	3,564	21,214	16.8
Female	8,305	121,021	6.9	8,242	120,062	6.9	2,374	31,801	7.5
Ethnicity	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
White-NH	23,435	214,866	10.9	22,755	212,923	10.7	5,502	46,547	11.8
Black-NH	246	3,033	8.1	205	2,930	7.0	68	826	8.2
Asian	172	8,201	2.1	170	8,172	2.1	61	2,661	2.3
Native Am.**	395	2,141	18.4	366	2,101	17.4	160	902	17.7
Hispanic	538	6,534	8.2	493	6,415	7.7	148	2,079	7.1
Marital	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
Married	9,930	149,944	6.6	9,865	149,594	6.6	1,786	22,940	7.8
Div/Sep/Wid	5,584	46,273	12.1	5,243	45,039	11.6	1,712	18,207	9.4
Never Mar	9,273	38,559	24.0	8,882	37,908	23.4	2,441	11,868	20.6
Education	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
Not HS Grad	4,560	41,872	10.9	4,311	40,852	10.6	1,114	16,523	6.7
HS Graduate	20,227	192,903	10.5	19,679	191,689	10.3	4,825	36,492	13.2
Poverty	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
Below 200%	6,706	55,121	12.2	5,939	53,015	11.2	5,939	53,015	11.2
Above 200%	18,081	179,654	10.1	18,051	179,526	10.1	0	0	.
Residence	Cases	Pop	Rate	Cases	Pop	Rate	Cases	Pop	Rate
Residential	23,990	232,541	10.3	451,030	232,541	194.0	5,939	53,015	11.2
Institutional	743	1,912	38.9	.	0	.	0	0	.
Group quarters	54	323	16.8	.	0	.	0	0	.

\* Includes institutions and group quarters

\*\* American Indian or Alaskan Native.

## ***Treatment Assessment Report Generation Tool***

The Division of Alcohol and Substance Abuse maintains a database of services provided under its programs. This is called the Treatment Assessment Report Generation Tool (TARGET). Reporting is required for treatment agencies providing public sector contracted or funded treatment services and optional for private pay individuals served. Thus TARGET includes data on services provided by or funded by DASA. Although sometimes included in TARGET, we did not report services funded by private payment, or private insurance, or services provided by private practitioners or detoxification provided as part of a medical admission. TARGET information collection is based on establishing a baseline at admission to treatment and capturing/identifying changes to that baseline upon discharge thus providing information on progress during treatment.

The present report draws from services data in TARGET provided to the non-institutionalized population during the five-year period from 1994 through 1998. DASA services provided to prisoners through the Department of Corrections are not included in this report. The services are summarized in three types of units designated: clients, admissions, and volume.

\* *Clients* designates the number of persons who have received DASA services within the year for each of the reported categories. These counts are unduplicated such that a person only counts once for a reported type of service even if they have received multiple instances of service within that type.

\* *Admissions (admits)* designates the number of identified admissions to programs within a type, and can be duplicated for an individual if that person is readmitted to the same service or is admitted to a different service within the same reporting category. When a person is admitted once for services spanning the end of a year, the admission is credited proportionally to both years. Thus a person admitted on December 1 and discharged on January 31 would be counted as having half an admission in each year.

\* *Volume* is a measure of contacts. For inpatient and residential services the unit of volume is the day. A day is credited for each whole or partial day in the program. A person admitted today and discharged tomorrow would count as having two days in the program. For outpatient programs the unit of volume is the contact/visit. Thus a person who had individual therapy on Monday and Friday of a week would be credited with two visits, as would a person having an individual and a group therapy visit on the same day.

We have provided summaries of service usage in two categorizations. The primary categories for reporting services are by the modality indicated on the admission record. These include a number of specific modalities such as "intensive inpatient", and "long term residential." These detailed modalities are summarized into 1) inpatient, 2) outpatient, 3) methadone and 4) total, for most tables. In addition to summaries by modality, we have provided summaries by specific type of activity within the outpatient and methadone modalities. Although not included in the summaries above, we have also included "detox," "transitional housing," and "dual diagnosis" tabulations under the category "supportive interventions."

## ***Service Trends from TARGET Database***

Table 4 presents the service summary trends for the time period from 1994 to 1998. It includes inpatient, outpatient, methadone, and total. Generally, patterns are consistent over time with some suggestion of decreased inpatient usage over time.

<b>Table 4. Service Trends for 1994-1998 for Clark County</b>					
Clients	1994	1995	1996	1997	1998
Inpatient Summary	403	467	476	440	505
Outpatient Summary	938	1,074	1,082	1,138	1,115
Methadone Summary	81	61	0	37	43
Total (Inpatient,Outpatient,Methadone)	1,112	1,257	1,217	1,273	1,372
Admits	1994	1995	1996	1997	1998
Inpatient Summary	496	553	590	537	599
Outpatient Summary	998	1,099	1,083	1,208	1,066
Methadone Summary	50	55	12	19	6
Total (Inpatient,Outpatient,Methadone)	1,544	1,707	1,685	1,764	1,671
Volume	1994	1995	1996	1997	1998
Inpatient summary - days	16,526	19,165	19,402	19,703	18,012
Outpatient summary - services	15,650	19,836	20,243	22,054	22,557
Methadone summary - services	3,631	2,722	0	1,226	2,294

Note: Total service volume is omitted because it would mix days and services.

## ***Service Use by Modality and Activity***

Table 5 presents the detailed breakout of service utilization by modality and activity. Specifically, within inpatient, outpatient, and methadone modalities, specific service activities are identified. For each modality and activity the number of clients, number of admissions, and service volumes are presented. The average volume per admission is also presented.



**Table 5. Service Use by Modality and Activity for 1998 for Clark County**

SERVICE SUMMARIES	Clients	Admissions	Volume	Volume/Adm.
Inpatient Summary	505	599	18,012	30.1
Outpatient Summary	1,115	1,066	22,557	21.2
Methadone Summary	43	6	2,294	382.3
Any Treatment	1,372	1,671	Not appl.	Not appl.
INPATIENT	Clients	Admissions	Volume	Volume/Adm.
II -Intensive Inpatient	379	386	7,361	19.1
LT -Long Term Residential	26	21	1,523	72.5
MR -MICA Residential	31	26	1,654	63.6
EC -Extended Care	0	0	0	.
RH -Recovery House	188	166	7,474	45.0
OUTPATIENT MODALITY	Clients	Admissions	Volume	Volume/Adm.
MO -MICA Outpatient	237	204	5,952	29.2
GC -Group Care	0	0	0	.
OP -Outpatient	898	862	16,605	19.3
METHADONE MODALITY	Clients	Admissions	Volume	Volume/Adm.
MT -Methadone Rx	43	6	2,294	382.3
OUTPATIENT ACTIVITY	Clients	Admissions	Volume	Volume/Adm.
OP-I Individual	757	718	2,330	3.2
OP-G Group	1,078	1,077	18,241	16.9
OP-J Conjoint - Family with Client	0	0	0	.
OP-F Family without Client	0	0	0	.
OP-C Childcare	14	10	242	23.8
OP-M Case Management	1	1	1	1.0
OP-A Acupuncture	3	3	6	2.0
OP-U Urinalysis	686	669	1,737	2.6
METHADONE ACTIVITY	Clients	Admissions	Volume	Volume/Adm.
MT-I Individual	42	31	460	15.1
MT-G Group	39	26	441	17.2
MT-J Conjoint - Family with Client	0	0	0	.
MT-F Family without Client	0	0	0	.
MT-C Childcare	1	1	28	28.0
MT-M Case Management	0	0	0	.
MT-A Acupuncture	2	2	15	7.5
MT-R Methadone Adjustment	0	0	0	.
MT-U Urinalysis	41	29	1,350	46.5
SUPPORTIVE INTERVENTIONS (Not in Summary)	Clients	Admissions	Volume	Volume/Adm.
DX -Detox	426	709	2,654	3.7
TH -Transitional Housing	0	0	0	.
DD -Dual Diagnosis	9	8	78	9.8

## Service Use by Demographics

The next two tables present service summaries for modalities by demographics. Table 6 presents summaries for inpatient and outpatient services. Table 7 presents summaries for methadone and total substance abuse services.

**Table 6. Inpatient and Outpatient Substance Abuse Services  
by Demographics for 1998 for Clark County**

St/Co total	Inpatient			Outpatient		
	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Total	505	599	18,012	1,115	1,066	22,557
Age	Clients	Admissions	Volume*	Clients	Admissions	Volume*
0-17	32	37	868	156	158	4,397
18-24	63	77	2,207	134	134	2,481
25-44	359	424	13,047	701	663	12,828
45-64	50	59	1,844	122	109	2,820
65+	1	2	46	2	2	31
Sex	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Male	328	393	11,901	619	595	12,019
Female	177	206	6,111	496	471	10,538
Race/ethnicity	Clients	Admissions	Volume*	Clients	Admissions	Volume*
White-NH	459	548	16,220	974	945	19,470
Black-NH	31	38	1,353	62	54	1,073
Asian	0	0	0	10	9	289
Native Am	9	8	384	28	27	667
Hispanic	6	5	55	41	31	1,058
Marital status	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Married	25	29	564	90	77	1,912
Sep/Wid/Div	215	257	8,293	449	424	8,720
Single	251	290	8,440	561	541	11,690
Education	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Not HS Grad	215	249	6,858	526	528	11,351
H.S. Graduate	290	350	11,154	589	538	11,206
Household income	Clients	Admissions	Volume*	Clients	Admissions	Volume*
0-1500/mo	500	593	17,900	1,072	1,020	21,305
1501-5000	3	4	80	41	45	1,240
5001+	2	2	32	2	1	12
Residence	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Household	340	390	11,197	946	891	20,117
Institutional	75	111	3,033	37	39	595
Group quarters	90	98	3,782	132	136	1,845

\* Inpatient volume is days. Outpatient volume is service contacts.

\*\* American Indian or Alaskan Native.

**Table 7. Methadone and Total Substance Abuse Services  
by Demographics for 1998 for Clark County**

St/Co total	Methadone			Total (In/Out/Meth)		
	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Total	43	6	2,294	1,372	1,671	Not appl.
Age	Clients	Admissions	Volume*	Clients	Admissions	Volume*
0-17	0	0	0	180	195	Not appl.
18-24	5	0	351	166	211	Not appl.
25-44	30	6	1,520	874	1,093	Not appl.
45-64	8	0	423	150	168	Not appl.
65+	0	0	0	2	4	Not appl.
Sex	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Male	12	1	624	776	989	Not appl.
Female	31	5	1,670	596	682	Not appl.
Race/ethnicity	Clients	Admissions	Volume*	Clients	Admissions	Volume*
White-NH	37	6	1,951	1,206	1,499	Not appl.
Black-NH	2	0	88	73	92	Not appl.
Asian	0	0	0	10	9	Not appl.
Native Am	2	0	127	36	35	Not appl.
Hispanic	2	0	128	47	36	Not appl.
Marital status	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Married	11	0	639	109	106	Not appl.
Sep/Wid/Div	20	3	1,105	556	684	Not appl.
Single	12	3	550	689	834	Not appl.
Education	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Not HS Grad	10	1	534	635	778	Not appl.
H.S. Graduate	33	5	1,760	737	893	Not appl.
Household income	Clients	Admissions	Volume*	Clients	Admissions	Volume*
0-1500/mo	42	6	2,234	1,326	1,619	Not appl.
1501-5000	1	0	60	42	49	Not appl.
5001+	0	0	0	4	3	Not appl.
Residence	Clients	Admissions	Volume*	Clients	Admissions	Volume*
Household	41	5	2,237	1,119	1,286	Not appl.
Institutional	0	0	0	99	150	Not appl.
Group quarters	2	1	57	154	235	Not appl.

\* Methadone volume is service contacts. No volume is provided for Total.

\*\* American Indian or Alaskan Native.

### ***Comparisons of Need and Services Funded through DASA***

The last analysis presented in this report is a comparison of rates of estimated need for services with rates of utilization of services. This comparison of use to need, in which the number of persons being served is presented as a percentage of the number of persons estimated to be in need, is called *met need*. To the extent that met need falls short of 100%, the shortfall is called *unmet need*.

This comparison is presented in Table 8 to facilitate identification of populations which are using fewer services than would be expected from the estimated need. Statewide, the use to need rate tends to run around 20%, suggesting a rather large amount of unmet need for treatment. However, the services identified in this comparison are only from the public sector. It is reasonable to expect that the private sector, either through insurance or self-pay, would meet some additional proportion of the estimated need. On the other hand, the estimates of need used in the comparison came only from households at or below 200% of the poverty level, who may lack any alternative to public services.

The comparisons show that some groups have less unmet need than others. This occurs in part because some populations are more likely to seek treatment than others and some programs may be better in their outreach to some populations than others. The differences may also be the result of the true local rate of need being greater or less than the estimates provided.

**Table 8. Rates of Current Need for Treatment, Use of DASA Treatment Services, and Ratio of Use to Need by Demographics for Clark County Adults Living in Households, 1998**

	At or below 200% of Poverty			DASA Target Clients		Need Met by DASA(%)
	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
Total	53,015	5,939	11.2	969	1.8	16.3
Age	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
18-24	9,773	2,204	22.6	133	1.4	6.0
25-44	22,338	13,056	13.3	700	3.1	5.4
45-64	11,233	619	5.5	135	1.2	21.8
65+	9,670	155	1.6	1	0.0	0.6
Sex	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
Male	21,214	3,564	16.8	525	2.5	14.7
Female	31,801	2,374	7.5	444	1.4	18.7
Race/ethnicity	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
White-NH	46,547	5,502	11.8	860	1.8	15.6
Black-NH	826	68	8.2	51	6.2	75.0
Asian	2,661	61	2.3	5	0.2	8.3
Native Am.*	902	160	17.7	22	2.4	13.8
Hispanic	2,079	148	7.1	31	1.5	20.9
Marital	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
Married	22,940	1,786	7.8	104	0.5	5.8
Sep/Wid/Div	18,207	1,712	9.4	455	2.5	26.6
Single	11,868	2,441	20.6	404	3.4	16.5
Education	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
Below HS	16,523	1,114	6.7	381	2.3	34.2
HS Grad	36,492	4,825	13.2	588	1.6	12.2

\* American Indian or Alaskan Native.

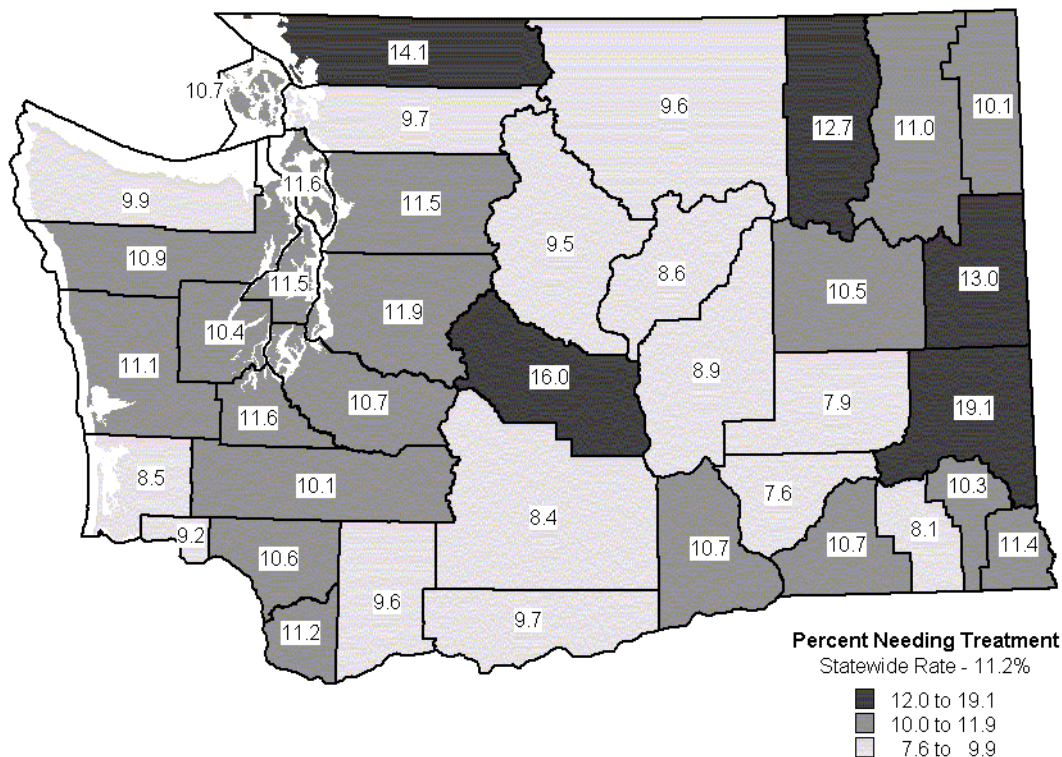
Table 9 presents the trends in the relationship between estimated need for services by adults at or below 200% of poverty and the utilization of services by services eligible adults. Youth below age 18 were not included in these comparisons because they were not included in the WANAHS survey. Although the estimated numbers in need of services change with fluctuations in the population, the overall rates of need remain relatively stable in most counties. There is somewhat more variation over time in the reported use of services and consequently in the use to need ratio.

**Table 9. Rates of Current Need for Treatment, Use of DASA Treatment Services, and Ratio of Use to Need for Clark County Adults Living in Households by Year**

	At or below 200% of Poverty			DASA Clients		Need Met by DASA(%)
	Population	Treatment Need	Need/Pop	Clients	Use/Pop	Use/Need
Adults-1994	45,450	5,208	11.5	672	1.5	12.9
Adults-1995	47,102	5,363	11.4	949	2.0	17.7
Adults-1996	49,079	5,535	11.3	847	1.7	15.3
Adults-1997	51,180	5,754	11.2	936	1.8	16.3
Adults-1998	53,015	5,939	11.2	969	1.8	16.3

The distribution of estimated current need for substance treatment, treatment provided by DASA, and the percentage of need met by DASA are presented in the following maps for the year 1998. These estimates are for the adult population in households and are based on the demographic composition of the counties.

**Current Need for Substance Abuse Treatment Services  
Among Adults Living in Households At or Below 200% FPL, 1998**





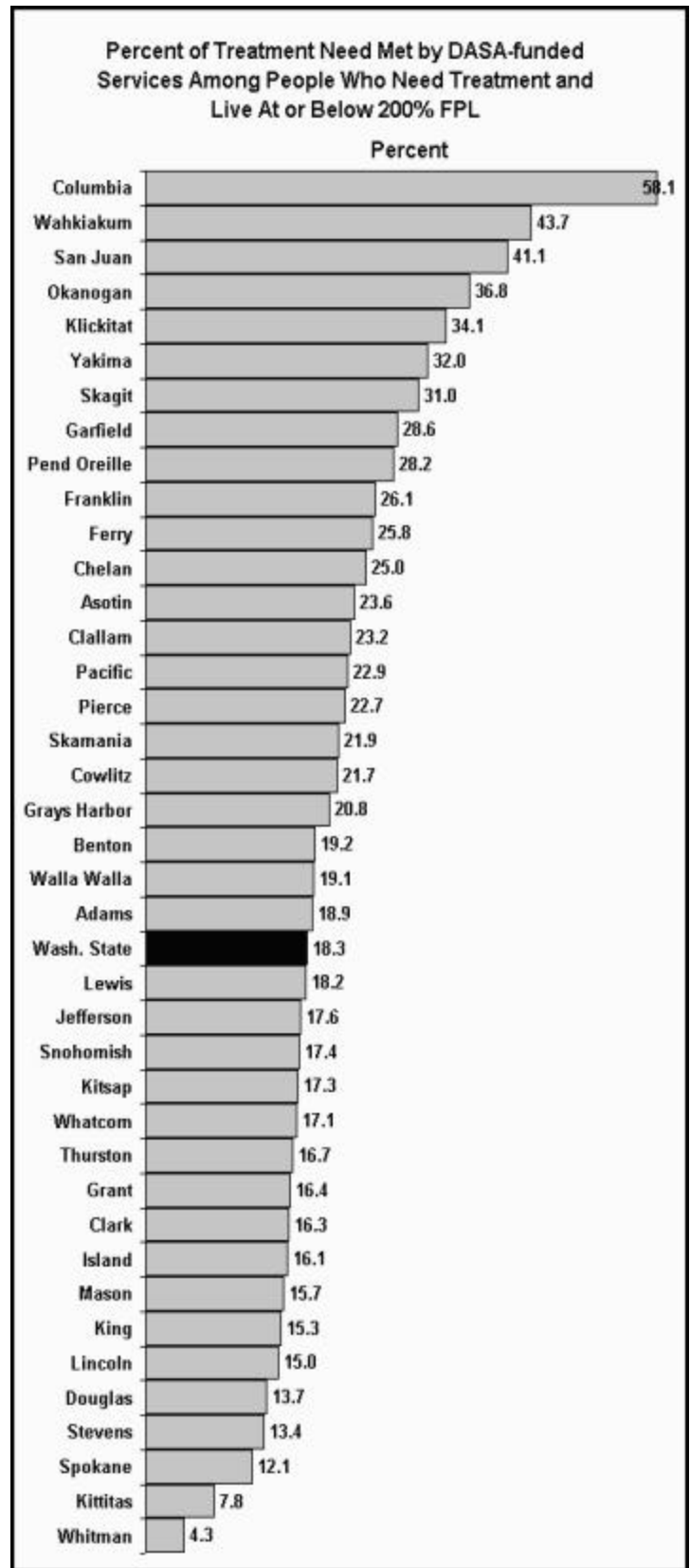
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**Percent of Need Met**  
Statewide Ratio - 18.3%

County	Percent of Need Met
Adams	28.2
Asotin	13.4
Benton	12.1
Burrton	4.3
Chelan	26.1
Columbia	19.1
Cowlitz	23.6
Douglas	58.1
Ferry	19.2
Franklin	34.1
Gigamon	21.9
Grant	16.3
Grays Harbor	21.7
Island	18.2
Jackson	16.7
Klickitat	22.9
Lincoln	18.9
Mason	15.0
Mitchell	13.7
Multnomah	7.8
Naselle	25.0
Okanogan	32.0
Pacific	17.4
Pendleton	15.3
Pierce	22.7
Portland	17.3
San Juan	16.1
Snohomish	17.6
Snoqualmie	20.8
Spokane	36.8
Stevens	31.0
Suquamish	17.1
Tacoma	43.7
Thurston	15.7
Walla Walla	15.5
Washou	17.0
Whitman	25.8
Yakima	23.2

**Table 10. Rates of Current Need for Treatment, Use of DASA Treatment, and Ratio of Use to Current Need by County for Washington State Adults Living in Households at or Below 200% FPL, 1998**

Adults Living At or Below 200% FPL						
		Need Treatment		Use DASA Treatment		Use/Need
County	Total	Number	% of Total	Number	% of Total	Percent
Wash. State	962,573	107,823	11.2	19,755	2.1	18.3
Adams	4,534	359	7.9	68	1.5	18.9
Asotin	4,340	496	11.4	117	2.7	23.6
Benton	23,549	2,528	10.7	486	2.1	19.2
Chelan	15,250	1,450	9.5	363	2.4	25.0
Clallam	14,071	1,398	9.9	325	2.3	23.2
Clark	53,015	5,939	11.2	969	1.8	16.3
Columbia	1,190	96	8.1	56	4.7	58.1
Cowlitz	19,047	2,011	10.6	437	2.3	21.7
Douglas	7,331	630	8.6	86	1.2	13.7
Ferry	2,024	256	12.7	66	3.3	25.8
Franklin	13,390	1,012	7.6	264	2.0	26.1
Garfield	508	52	10.3	15	3.0	28.6
Grant	20,624	1,843	8.9	303	1.5	16.4
Grays Harbor	16,915	1,874	11.1	389	2.3	20.8
Island	11,210	1,295	11.6	209	1.9	16.1
Jefferson	6,200	677	10.9	119	1.9	17.6
King	212,311	25,212	11.9	3,845	1.8	15.3
Kitsap	31,264	3,587	11.5	620	2.0	17.3
Kittitas	8,593	1,379	16.0	108	1.3	7.8
Klickitat	5,248	508	9.7	173	3.3	34.1
Lewis	16,604	1,685	10.1	307	1.8	18.2
Lincoln	2,408	253	10.5	38	1.6	15.0
Mason	9,902	1,029	10.4	161	1.6	15.7
Okanogan	12,441	1,196	9.6	440	3.5	36.8
Pacific	6,292	538	8.5	123	2.0	22.9
Pend Oreille	3,160	319	10.1	90	2.8	28.2
Pierce	110,913	11,884	10.7	2,695	2.4	22.7
San Juan	1,905	204	10.7	84	4.4	41.1
Skagit	17,191	1,672	9.7	519	3.0	31.0
Skamania	2,323	224	9.6	49	2.1	21.9
Snohomish	66,860	7,657	11.5	1,335	2.0	17.4
Spokane	86,087	11,150	13.0	1,346	1.6	12.1
Stevens	9,833	1,083	11.0	145	1.5	13.4
Thurston	32,352	3,759	11.6	626	1.9	16.7
Wahkiakum	870	80	9.2	35	4.0	43.7
Walla Walla	11,174	1,195	10.7	228	2.0	19.1
Whatcom	29,796	4,201	14.1	718	2.4	17.1
Whitman	10,062	1,925	19.1	83	0.8	4.3
Yakima	61,787	5,166	8.4	1,652	2.7	32.0



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### **Special Acknowledgments**

Kenneth Stark, Director  
*DSHS / Division of Alcohol and Substance Abuse*

Elizabeth Kohlenberg, Ph.D., Acting Director  
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December, 1999  
Report 4.32 - 6  
Clark County



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